

Note: Under the Freedom of Information and Protection of Privacy Act, the use of this form is mandatory.

Instructions

This form is composed of two parts. In section A, the candidate must provide personal information and indicate the deadline date for returning this form and the address to which the form is to be returned. Details about deadline dates and where to submit the application form and documentation is provided on the OGS section of the OSAP website. Section B must be completed by a professor who is providing the reference. The completed report should be sent by the professor to the appropriate address by the deadline date.

Section A - to be completed by candidate

Full name	Student number	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Name of university at which you are currently enrolled	Current department	Name of intended discipline
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input type="checkbox"/> Submit Report by:		<input type="checkbox"/> Send Report to (indicate full address):
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>

Section B - to be completed by professor

Carefully mark the category that best describes this applicant's academic performance in relation to **all students** at a similar stage that you have previously evaluated. Please apply the strictest interpretations of the rankings indicated below. For example, the ranking of a student in the top category is expected to occur infrequently. **You must complete, sign, and date Section B.** In addition, if you wish to elaborate on the assessment or provide other relevant comments, please complete the attached form. **You must also sign the attached form.**

	Top 2%	Top 5%	Top 10%	Top 20%	Top 50%	Lower 50%	Unable to evaluate
A. Background preparation							
B. Originality							
C. Present ability at research							
D. Research potential							
E. Industriousness							
F. Judgement							
G. Oral and written skills							
H. Overall ability							

I knew the candidate in my capacity as

during the period to
Month/Year
Month/Year

Name	Title
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Department	University
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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N.B.:One page only, letter size, single spaced, 12 point Arial font, 3/4" margins

Last name:

Student Number:

First name:

Signature